INFANT DEATHS, FETAL DEATHS, AND ABORTIONS

INFANT DEATHS

In 2010, there were 26 resident infant deaths for a rate of 4.2 infant deaths per 1,000 live births, a decrease from 6.2 in 2009, a sudden increase following subsequent decreases from 2005-2009. This rate is lower than the 2010 U.S. white rate of 5.2. Comparisons are made to the U.S. white rate because 96.2 percent of the Vermont resident infant deaths were to whites in 2010. The Vermont infant mortality rate steadily declined from 24.0 in 1960 to 5.8 per 1,000 live births in 1991. Over the past two decades the rate has fluctuated between a high of 7.4 in 1994 and a low of 4.2 in 2010. (Table A-1)

Fourteen (53.8 percent) of the infant deaths occurred during the neonatal period, that is before the infant became 28 days old (<u>Table D-6</u>). The neonatal death rate was 2.2 deaths per 1,000 live births (<u>Table D-5</u>), lower than the 2010 U.S. white neonatal death rate of 3.5. The Vermont neonatal death rate decreased from 18.6 in 1960, to 14.4 in 1970, to 6.2 in 1980, to 3.6 in 1990 (<u>Table A-1</u>), then followed an increasing trend through the nineties to a high of 5.9 in 1998. The rate has fluctuated throughout this decade.

One of the most important risk factors in infant mortality is low birth weight (<u>Table D-7</u>). Of resident infants who died in 2010, 61.5 percent had a birth weight less than 2500 grams (5 pounds 8 ounces), while 6.2 percent of all resident births were low weight. The infant mortality rate for low weight births was 41.8 deaths per 1,000 live births. Age of mother is also related to infant mortality (<u>Table D-5</u>), with the highest rates typically seen in the younger age groups. The infant mortality rate for mothers 20 through 24 years of age was 6.8, and for mothers age 25 through 29 the rate was 6.1 for 2008 through 2010. The 25 to 29 year old maternal age group had the highest neonatal death rate at 4.7.

FETAL DEATHS

Unlike births and deaths, reports of fetal deaths and abortions are not shared among states. Therefore, statistics concerning these events reflect occurrences in Vermont <u>only</u> and do not include Vermont resident fetal deaths and abortions that occurred in other states.

There were 23 resident fetal deaths in 2010 (<u>Table D-1</u>) for a rate of 3.7 per 1,000 live births and fetal deaths, up from 3.4 per 1,000 live births and fetal deaths in 2009 (<u>Table D-5</u>). Of the fetal deaths in Vermont, 21 weighed less than 2500 grams (<u>Table D-7</u>). From 2008 to 2010, the fetal death rate was highest in the 40 to 44 age group: 7.6 per 1,000 live births (<u>Table D-5</u>).

VERMONT ABORTIONS

There were 1333 abortions performed in Vermont in 2010, the slight increase from 1319 in 2009. Vermont residents accounted for 1239, or 93.0 percent. This represents a rate of 10.5 per 1,000 women age 15 to 44.

The abortion ratio is the number of resident abortions occurring in Vermont times 1,000, divided by the total resident live births. The abortion ratio for 2010 was 199.1 abortions per 1,000 live births, the lowest ratio since 2001. The U.S. white abortion ratio was 131 per 1,000 live births in 2009. Women age 20 to 24 had the highest *age-specific* abortion rate, of 22.3 per 1,000 women, followed by women age 25 to 29 at 18.1.

First trimester abortions (less than or equal to 12 weeks) accounted for 95.0 percent of all Vermont abortions and 72.1 percent of all Vermont abortions were for pregnancies of less than 9 weeks duration (<u>Table E-5</u>). See <u>Appendix B</u> for the method used to compute the number of weeks of gestation.